

NON USE CERTIFICATION MONITORING REPORT - 2 2008 **LOCAL LIMITS**

NAME: CRAFT TEXTILE PRINTING Co., Inc.

MAILING ADDRESS: P.O. Box 2761, Paterson, NJ 07509-2761

FACILITY LOCATION: 44 Beech Street, Paterson, NJ 07501

CATEGORY & SUBPART N/A PERMIT #: 27220136 OUTLET #: 1

CONTACT OFFICIAL: H.R. CASPARIAN - President TELEPHONE #: 973-278-3818

have been authorized to certify non-use for the following heavy metals:

Arsenic _____	Lead <u>X</u>	Zinc _____	SAMPLE DATE			
Cadmium <u>X</u>	Mercury <u>X</u>		MONTH	DAY	YEAR	
Chromium _____	Molybdenum _____		<u>9</u>	<u>3</u>	<u>2008</u>	
Copper _____	Nickel <u>X</u>					

PARAMETER		CONCENTRATION			SAMPLE TYPE
		RESULT	THRESHOLD VALUE EXCEEDED YES OR NO	UNITS	
CADMIUM	Sample Measurement	<u><0.0006</u> ✓	NO	mg/L	Comp
	Threshold Value	0.005			
LEAD	Sample Measurement	<u><0.0036</u> ✓			
	Threshold Value	0.029			
MERCURY	Sample Measurement	<u><0.00013</u> ✓			
	Threshold Value	0.001			
NICKEL	Sample Measurement	<u><0.0039</u> ✓			
	Threshold Value	0.020			
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				



PVSC Form MR-3 10/96

- (1) I have reviewed the analytical data on the reverse side of this form and any applicable prior forms and hereby certify that we have met the non-use certification criteria for the following heavy metals:

As	<input checked="" type="checkbox"/>	Cr	<input checked="" type="checkbox"/>	Pb	<input checked="" type="checkbox"/>	Mo	<input checked="" type="checkbox"/>	Zn	<input checked="" type="checkbox"/>
Cd	<input checked="" type="checkbox"/>	Cu	<input checked="" type="checkbox"/>	Hg	<input checked="" type="checkbox"/>	Ni	<input checked="" type="checkbox"/>		

Therefore, I am required to monitor for these heavy metals only in March and September.

- (2) (a) I have reviewed the analytical data on the reverse side of this form and any applicable prior forms and hereby certify that we have not yet met the non-use certification criteria for the following heavy metals:

	*		*		*
Arsenic	<input checked="" type="checkbox"/>	Copper	<input type="checkbox"/>	Molybdenum	<input checked="" type="checkbox"/>
Cadmium	<input type="checkbox"/>	Lead	<input type="checkbox"/>	Nickel	<input type="checkbox"/>
Chromium	<input checked="" type="checkbox"/>	Mercury	<input type="checkbox"/>	Zinc	<input checked="" type="checkbox"/>

- (b)* Means the number of additional monthly samples needed to reach 3 months in succession when the value is equal to or below the Threshold Value. I understand that I must automatically monitor for the heavy metals identified in (2) (a) above each month until the analytical results for three (3) months in succession are at or below the threshold value for that heavy metal. This will not affect my responsibility to monitor in March and September as required by Section B-103.

I certify under penalty of law that this document and attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

403.6(a)(2)(ii) revised by 53 FR 40610, October 17, 1988

9/26/08
Date

H.R. Caspalian
Signature of Principal
Executive or Authorized Agent

H.R. CASPALIAN

PRESIDENT

Type Name and Title

NON USE CERTIFICATION MONITORING REPORT **LOCAL LIMITS**

NAME: CRAFT TEXTILE PRINTING Co., Inc.
 MAILING ADDRESS: P.O. Box 2761, Paterson, NJ 07509-2761
 FACILITY LOCATION: 44 Beech Street, Paterson, NJ 07501
 CATEGORY & SUBPART N/A PERMIT #: 27220136 OUTLET #: 2
 CONTACT OFFICIAL: H.R. CASPARIAN - President TELEPHONE #: 973-278-3818

have been authorized to certify non-use for the following heavy metals:

Arsenic _____	Lead <u>X</u>	Zinc _____	SAMPLE DATE			
Cadmium <u>X</u>	Mercury <u>X</u>		MONTH	DAY	YEAR	
Chromium _____	Molybdenum _____		<u>9</u>	<u>3</u>	<u>2008</u>	
Copper _____	Nickel <u>X</u>					

PARAMETER		CONCENTRATION			SAMPLE TYPE
		RESULT	THRESHOLD VALUE EXCEEDED YES OR NO	UNITS	COMP/GRAB
CADMIUM	Sample Measurement	<u><0.0006</u> ✓	<u>NO</u>	<u>mg/L</u>	<u>Comp</u>
	Threshold Value	<u>0.005</u>			
LEAD	Sample Measurement	<u><0.0036</u> ✓	<u>I</u>	<u>I</u>	<u>I</u>
	Threshold Value	<u>0.029</u>			
MERCURY	Sample Measurement	<u><0.00013</u> ✓	<u>I</u>	<u>I</u>	<u>I</u>
	Threshold Value	<u>0.001</u>			
NICKEL	Sample Measurement	<u><0.0039</u> ✓	<u>I</u>	<u>I</u>	<u>I</u>
	Threshold Value	<u>0.020</u>			
COPPER	Sample Measurement	<u>0.124</u> ✓	<u>Y</u>	<u>mg/L</u>	<u>Comp.</u>
	Threshold Value	<u>0.092</u>			
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				

PVSC Form MR-3 10/96

- (1) I have reviewed the analytical data on the reverse side of this form and any applicable prior forms and hereby certify that we have met the non-use certification criteria for the following heavy metals:

As	<input checked="" type="checkbox"/>	Cr	<input checked="" type="checkbox"/>	Pb	<input checked="" type="checkbox"/>	Mo	<input checked="" type="checkbox"/>	Zn	<input checked="" type="checkbox"/>
Cd	<input checked="" type="checkbox"/>	Cu	<input type="checkbox"/>	Hg	<input checked="" type="checkbox"/>	Ni	<input checked="" type="checkbox"/>		

Therefore, I am required to monitor for these heavy metals only in March and September.

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Arsenic	<input checked="" type="checkbox"/>	Copper	<input checked="" type="checkbox"/>	Molybdenum	<input checked="" type="checkbox"/>
Cadmium	<input type="checkbox"/>	Lead	<input type="checkbox"/>	Nickel	<input type="checkbox"/>
Chromium	<input checked="" type="checkbox"/>	Mercury	<input type="checkbox"/>	Zinc	<input checked="" type="checkbox"/>

- (b)* Means the number of additional monthly samples needed to reach 3 months in succession when the value is equal to or below the Threshold Value. I understand that I must automatically monitor for the heavy metals identified in (2) (a) above each month until the analytical results for three (3) months in succession are at or below the threshold value for that heavy metal. This will not affect my responsibility to monitor in March and September as required by Section B-103.

I certify under penalty of law that this document and attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

403.6(a)(2)(ii) revised by 53 FR 40610, October 17, 1988

9/26/08

Date

H.R. Casparian

Signature of Principal
Executive or Authorized Agent

H.R. CASPARIAN

PRESIDENT

Type Name and Title

Please check one:

☐ 110 Route 4

Englewood, NJ 07631

(201) 567-6868

Fax (201) 567-1333

☐ 205 Campus Plaza 1

Edison, NJ 08837

(732) 225-4111

Fax (732) 225-4110

CHEMTECH JOB NO.: **2 4390**

CHEMTECH QUOTE NO.:

CHEMTECH**CHAIN OF CUSTODY RECORD**

CLIENT INFORMATION				PROJECT INFORMATION				BILLING INFORMATION								
REPORT TO BE SENT TO:				PROJECT NAME:				BILL TO:								
COMPANY: CRAFT TEXTILE PRINTING Co.				PROJECT NO.:				ADDRESS:								
ADDRESS: P.O. Box 2761				PROJECT MANAGER:				CITY:								
STATE: NJ ZIP: 07509-2761				LOCATION:				STATE: ZIP:								
CITY: PATERSON				PHONE:				ATTENTION:								
ATTENTION: H.R. CASPARIAN				FAX:				PHONE:								
PHONE: 973-278-3818				FAX: 973-523-8677				ANALYSIS:								
DATA TURNAROUND INFORMATION				DATA DELIVERABLE INFORMATION				PRESERVATIVES								
FAX: _____ DAYS: _____				<input type="checkbox"/> RESULTS ONLY <input type="checkbox"/> RESULTS + QC <input type="checkbox"/> NJ REDUCED <input type="checkbox"/> NJ CLP <input type="checkbox"/> EDD FORMAT: _____				<input type="checkbox"/> USEPA CLP <input type="checkbox"/> NYS ASP "B" <input type="checkbox"/> NYS ASP "A" <input type="checkbox"/> EDD								
HARD COPY: _____ DAYS: _____				EDD: _____ DAYS: _____				← Specify Preservatives A-HCl B-HNO ₃ C-H ₂ SO ₄ D-NaOH E-ICE F-Other								
* TO BE APPROVED BY CHEMTECH				* NORMAL TURNAROUND TIME - 14 DAYS												
CHEMTECH SAMPLE ID	PROJECT IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE	SAMPLE COLLECTION	DATE	TIME	NO. OF BOTTLES	COMMENTS								
1.	Outlet #1	X	PM	9/3/08	NOON	2		1	2	3	4	5	6	7	8	9
2.	Outlet #2	X	PM	9/3/08	NOON	2										
3.																
4.																
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SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION INCLUDING COURIER DELIVERY																
RECEIVED BY SUPPLIER:				RECEIVED BY:				RECEIVED FOR LAB BY:				Comments:				
1. HR Casparian				DATE/TIME: 9/3/08 - NOON				1. HR Casparian				Conditions of bottles or coolers at receipt: <input checked="" type="checkbox"/> Compliant <input type="checkbox"/> Non-Compliant <input type="checkbox"/> Temp. of Cooler 6°C				
2. HR Casparian				DATE/TIME: 9/3/08				2. HR Casparian								
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Ver. 6/2000

WHITE - CHEMTECH COPY FOR RETURN TO CLIENT

YELLOW - CHEMTECH COPY

PINK - SAMPLER COPY

Shipment Complete: Yes ☒ No ☐

Page 1 of 1

38746



284 Sheffield Street, Mountainside, NJ 07092 Phone: 908-789-8900 Fax: 908-789-8922

Report of Analysis

Client: Craft Textile Printing

Date Collected: 9/3/2008

Project: Permit Renewal 2008

Date Received: 9/3/2008

Client Sample ID: OUTLET-1

SDG No.: Z4390

Lab Sample ID: Z4390-01

Matrix: WATER

% Solids: 0.00

CAS No.	Analyte	Conc.	Qualifier	Units	DL	Dilution	Date Prep	Date Anal.	Method
7440-43-9	Cadmium	0.600	U	ug/L	0.600	1	9/5/2008	9/9/2008	EPA 200.7 ICP 4
7440-50-8	Copper	11.8		ug/L	2.400	1	9/5/2008	9/9/2008	EPA 200.7 ICP 4
7439-92-1	Lead	3.600	U	ug/L	3.600	1	9/5/2008	9/9/2008	EPA 200.7 ICP 4
7439-97-6	Mercury	0.1300	U	ug/L	0.130	1	9/5/2008	9/5/2008	EPA SW-846 245.1
7440-02-0	Nickel	3.900	U	ug/L	3.900	1	9/5/2008	9/9/2008	EPA 200.7 ICP 4
7440-66-6	Zinc	46.3		ug/L	4.800	1	9/5/2008	9/9/2008	EPA 200.7 ICP 4

Comments:

U = Not Detected

DL = Method Detection Limit or Instrument Detection Limit

J = Estimated Value

B = Analyte Found In Associated Method Blank

N = Spiked sample recovery not within control limits 7



284 Sheffield Street, Mountainside, NJ 07092 Phone: 908-789-8900 Fax: 908-789-8922

Report of Analysis

Client: Craft Textile Printing

Date Collected: 9/3/2008

Project: Permit Renewal 2008

Date Received: 9/3/2008

Client Sample ID: OUTLET-2

SDG No.: Z4390

Lab Sample ID: Z4390-02

Matrix: WATER

% Solids: 0.00

CAS No.	Analyte	Conc.	Qualifier	Units	DL	Dilution	Date Prep	Date Anal.	Method
7440-43-9	Cadmium	0.600	U	ug/L	0.600	1	9/5/2008	9/9/2008	EPA 200.7 ICP 4
7440-50-8	Copper	124		ug/L	2.400	1	9/5/2008	9/9/2008	EPA 200.7 ICP 4
7439-92-1	Lead	3.600	U	ug/L	3.600	1	9/5/2008	9/9/2008	EPA 200.7 ICP 4
7439-97-6	Mercury	0.1300	U	ug/L	0.130	1	9/5/2008	9/5/2008	EPA SW-846 245.1
7440-02-0	Nickel	3.900	U	ug/L	3.900	1	9/5/2008	9/9/2008	EPA 200.7 ICP 4
7440-66-6	Zinc	21.8		ug/L	4.800	1	9/5/2008	9/9/2008	EPA 200.7 ICP 4

Comments:

U = Not Detected

DL = Method Detection Limit or Instrument Detection Limit

J = Estimated Value

B = Analyte Found In Associated Method Blank

N = Spiked sample recovery not within control limits 8